Attorney's Docket No.: 05918-220001 Client's Ref. No.:

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COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled <u>INTERFACE TAPE</u>, the specification of which:

[X] [] []	is attached hereto. was filed on _ as Application Serial No and was described and claimed in PCT Internation and as amended under PC	nal Application No	filed on
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.			
	mowledge the duty to disclose all information I e of Federal Regulations, §1.56.	know to be material to patentability in	n accordance with
I her in the Patent a	eby appoint the following attorneys and/or agenuted Trademark Office connected therewith:	nts to prosecute this application and to	transact all business
John N. Willia	r, Reg. No. 33,524 ams, Reg. No. 18,948 n, Reg. No. 37,640	Timothy A. French, Reg. No. 30,175 James W. Babineau, Reg. No. 42,276	
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Address all correspondence to JOHN N. WILLIAMS at:			
FISH & RICHARDSON P.C. 225 Franklin Street Boston, Massachusetts 02110-2804			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.			
Full Name of Inventor's Sig Residence Ad Citizenship: Post Office A	gnature: ddress: 54 Hardy Road, Bedford, NH 03 Canadian		1/11/02

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Combined Declaration and Power of Attorney

Page 2 of 2 Pages

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